

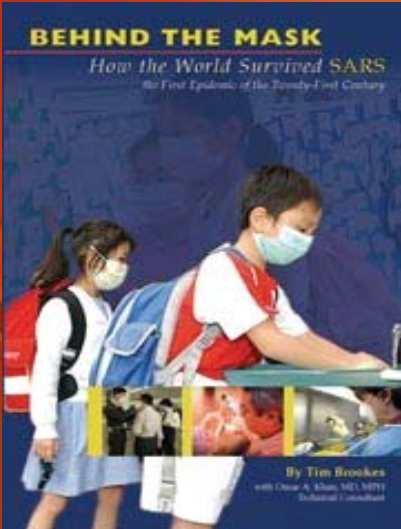
Keiji Fukuda
CDC
Epidemiologist
Flu Hunter



Together battled avian
Influenza in Hong Kong in
1997

Keiji Fukuda
CDC
Epidemiologist
Flu Hunter


Dr. Margaret
Chan,
Director of
Health in
Hong Kong



BEHIND THE MASK
How the World Survived SARS
The First Epidemic of the Twenty-First Century

By Tim Brooks
with Oscar A. Khan, MD, MPH
Illustrated by David H. Johnson

Then came SARS
Nov 2002 – July 2003



Time Line for WHO Global Advisories During SARS Epidemic (selected entries)

- March 12, 2003 WHO –First alert re: atypical pneumonia
- March 15, 2003 WHO First emergency travel advisory
- March 27, 2003 WHO recommends screening departing airline travellers from worst affected areas: Q Have you had contact? Q Are you sick?
- April 2, 2003 WHO recommends postponement of all non-essential travel to Hong Kong and Guangdong province.
- April 23, 2003 WHO recommends postponement of non-essential travel to Toronto (lifted 6 days later—April 29)
- May 26, 2003 WHO changes Toronto status because of new SARS cases
- July 2, 2003 WHO declares Toronto SARS-free, last WHO advisory to be lifted

**The WHO was in charge--
leading the international
confrontation against the
1st epidemic of the 21st
Century**



**But who was on duty?
And upon what authority was it acting?**

The WHO

**The WHO is the United Nations specialized
agency for health.**

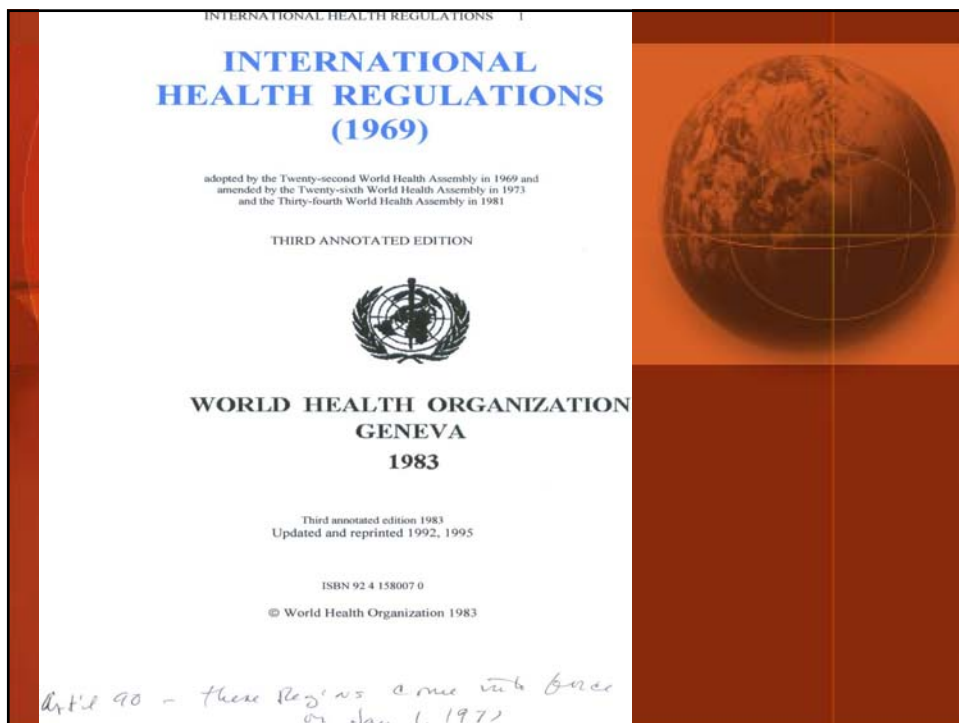
Estab. 1948

**Governed by World Health Assembly
(representing 192 member states)**

**The WHA meets every May in Geneva,
Switzerland**



International Health Regulations:
As presented by Judith W Munson at the Great Lakes Border Health Initiative Conference, June 14, 2007.



WHO

The International Health Regulations

--The 1969 Version of the IHRs—

were applicable only to 3 diseases:

cholera, plague, and yellow fever

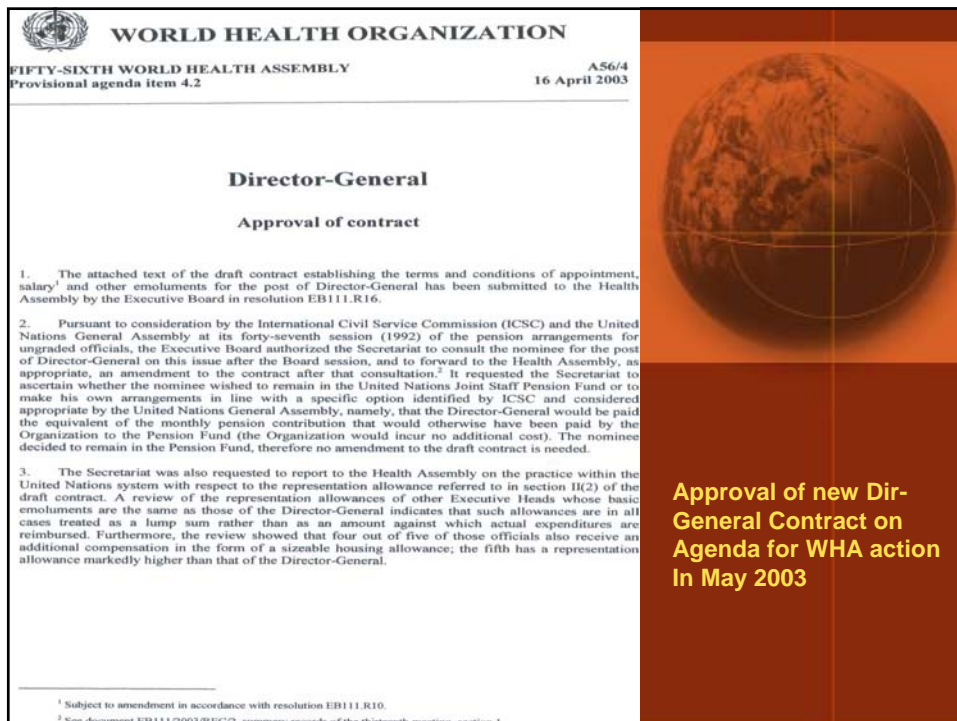
while SARS was circling the globe in 2003

WHO

Gro Harlem Brundtland Former Director-General

Nominated January 27
Elected May 13, 1998, she
assumed her role on 21
July 1998 and ended her
term on 21 July 2003







Dr. Lee Jong-wook, Former Director General World Health Organization

Nominated on January 28, 2003

Elected on May 21, 2003

Died suddenly May 22, 2006



WORLD HEALTH ORGANIZATION

FIFTY-SIXTH WORLD HEALTH ASSEMBLY
Provisional agenda item 14.16

A56/25
24 March 2003

Revision of the International Health Regulations

Report by the Secretariat

BACKGROUND

1. The *International Sanitary Regulations* were adopted by the Fourth World Health Assembly in 1951 as the first single international code of measures for preventing the international spread of designated infectious diseases and of requirements for reports and notifications of cases of these diseases.¹ Measures were designed to ensure the maximum security against the international spread of disease with a minimum interference in world traffic. They were replaced in 1969 by the *International Health Regulations*, which were subsequently amended in 1973 with additional provisions for cholera, and revised in 1981 to exclude smallpox.

2. The Forty-eighth World Health Assembly expressed the need for further substantial revision in view of the resurgence of infectious diseases and the heightened risk of their international spread caused, in particular, by the growth of commercial air transport. Resolution WHA48.7 requested the Director-General to take steps to prepare a revision and urged broad participation and cooperation in this process. A series of expert consultations and working groups was held between 1995 and 1997 to secure consensus on the direction of the revision process.

3. A report on progress of the revision summarized the results of these consultations and working groups, including the proposal that the reporting of specific diseases be replaced by the immediate reporting of a number of defined clinical syndromes that are of international importance.² The approach was subsequently field-tested in 22 countries selected from each WHO region. Results, reported to the Fifty-fourth World Health Assembly, supported the conclusion that syndromic reporting, although valuable within a national system, was not appropriate for use in the context of a regulatory framework.³

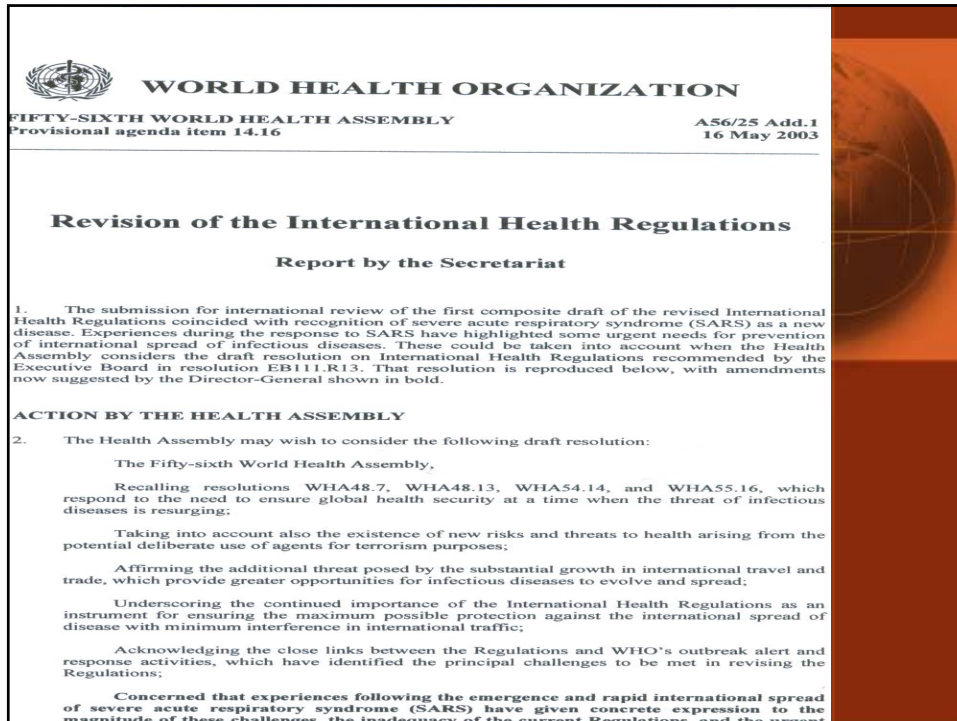
4. The report noted that the Regulations serve as the framework for WHO's outbreak alert and response activities, and defined an approach to the revision process based on three main challenges that had been identified during alert and response activities.⁴ The approach goes beyond notification of

¹ WHO Regulations No. 2, adopted in accordance with Article 21 of the Constitution.

² See document EB101/12.

³ See document A54/9.

⁴ These challenges are: ensuring that only public health risks (usually caused by an infectious agent) that are of urgent international importance are reported under the Regulations; avoiding stigmatization and unnecessary negative impact on international travel and trade of invalid reporting from sources other than Member States, which can have serious economic consequences for countries; and making sure that the Regulations are consistent, coherent, and that they do not create unnecessary barriers to trade.



WHO 56 WHA A56/25 Add.1

Provisional agenda item 14.16 16 May 2003

Concerned that experiences following the emergence and rapid international spread of severe acute respiratory syndrome (SARS) have given concrete expression to the magnitude of these challenges, the inadequacy of the current Regulations, and the urgent need for WHO and its international partners to undertake specific actions not addressed by the Regulations . . . **URGES Members States:**

... (2) to establish immediately a national standing task force or equivalent group and, within it, to designate an official or officials having operational responsibilities and accessible at all times by telephone or electronic communication, to ensure the speed, particularly during emergencies, of both reporting to WHO and consultation with national authorities when urgent decisions must be made;

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Cont'd

4. REQUESTS the Director-General:

- (1) to take into account reports from sources other than official notifications, to validate these reports according to established epidemiological principles and, when necessary and after informing the government concerned, to alert the international community to the presence of a public health threat that may constitute a serious threat to neighboring countries or to international health;**
- (2) To collaborate with national authorities to assess the severity of the threat and the adequacy of control measures and, when necessary and after informing the government concerned, to conduct on-the-spot studies by a WHO team, with the purpose of ensuring that appropriate control measures are being employed;**

WHO

Revision of the International Health Regulations

--The IHR—

Revisions adopted in May, 2005

**Two years after adoption they
come into force (June 15 2007)**

**The revision of the
International Health Regulations
addresses the following concerns:**

- Global health security
- Epidemic alert and response
- Global public health response to natural, occurrence, accidental release, or
- Deliberate use of biological and chemical agents or radio-nuclear material that affect health, and
- Assess and report events which constitute a “Public health emergency of international concern”

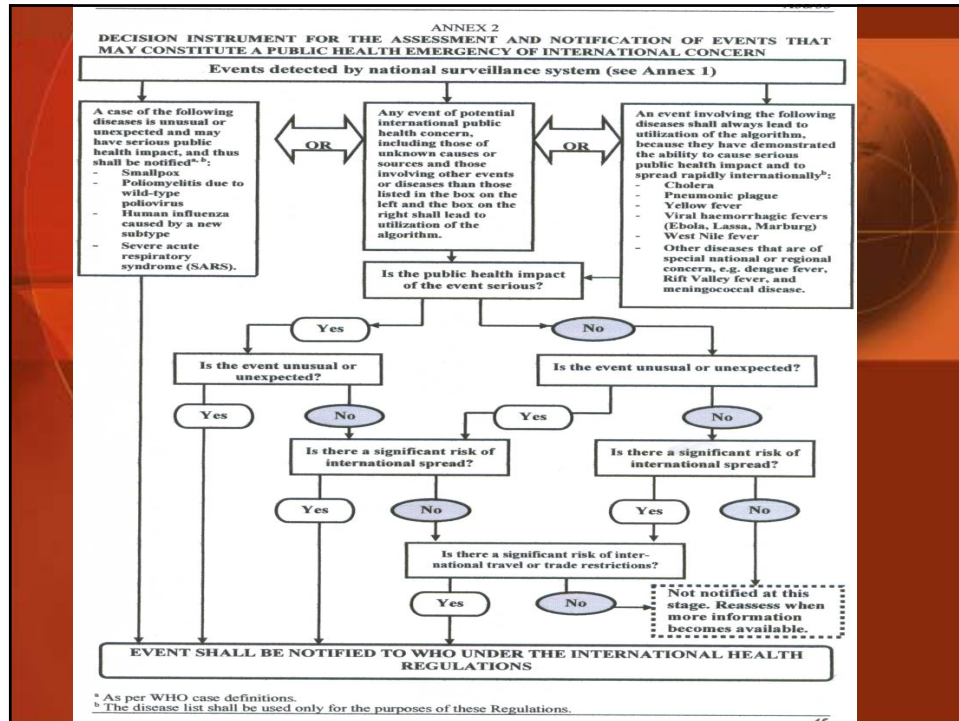


**MOST IMPORTANT PROVISIONS OF
THE IHR***

- No longer limited in scope to 3 diseases—now, encompasses any event which may constitute a “public health emergency of international concern”
- Such events must be reported in accordance with Annex 2.
- The Director-General determines whether an event constitutes a PUBLIC HEALTH EMERGENCY OF INTERNATIONAL CONCERN”

Jwm opinion only





MOST IMPORTANT PROVISIONS OF THE IHR (cont'd):

Establishes a global public health communication network (Article 4)

--a National IHR focal Point for each State Party to be designated

--WHO IHR Contact Points to be identified

MOST IMPORTANT PROVISIONS OF THE IHR (cont'd):

**Establishes an IHR Roster of Experts
and makes provisions for the selection of experts from the
Roster for the Emergency Committee**
“according to the fields of expertise and experience most
relevant to the specific event that is occurring.”

**This assists in the highest level of expertise being brought
to bear upon any threat to the public's health on a
moments notice.**

MOST IMPORTANT PROVISIONS OF THE IHR (cont'd):

CNN rule:

**WHO will maintain confidentiality of
member state information UNLESS**
“information about the same event
has already become publicly
available”—in which case WHO may
make the information available to
the public.

(Article 11)

The WHO

Headquarters: Geneva, Switzerland

Director-General: Margaret Chan

Elected November 6 – 9, 2006

Assumed duties: January 4, 2007



**We have come full circle, as the
major threat to the public's health
on the international platform is an
avian influenza pandemic**

**...and the doctor who made the
decisions that eradicated AI H5N1 in
1997 is now the Director-General of the
World Health Organization**

